

**Saint Margaret Mercy North Campus
North Campus
5454 Hohman Avenue
Hammond Ave., IN 46320
219-932-2300 or 708-891-9305**

Date: Wednesday, May 24, 2006

Patient: VIKARAM BUDDHI

Doctor: John DeSalvo D.O.

IMPORTANT: Please take these instruction sheets with you when you follow up with your primary physician or the physician to which you were referred.

The following Diagnosis(es) have been made:

Strain - cervical 847.0

The following instruction(s) should be read carefully:

Strains

A strain refers to injury of the muscle fibers. This may be a minor "pulled" muscle that most of us get after doing more than we are used to. Or the injury may be much more serious, involving extensive tearing of a muscle.

Resting the injured area is the most important part of treatment of strains. Elevation and ice for the first 2-3 days is often very helpful also. How long you need to stay at rest depends on the severity of the injury and what your work is. For minor strains, you may be able to continue your normal duties. A good rule of thumb is to not do whatever causes much pain.

Anti-inflammatory medication is often used for muscle strains. If this was advised or prescribed for you, take them regularly until you are well. They are not as effective if taken just when you feel you need them. Pain medications are often prescribed also for more major strains.

It is important to carefully and gradually resume activities as comfort allows. If you start having increased pain, it may be because of trying to get back to normal too soon. On the other hand, you probably should not wait until the last twinge of discomfort is gone before starting to get active again. Use good judgement to find the right balance.

NOTIFY YOUR DOCTOR right away or return to the Emergency Department immediately in case of the following:

- The injured extremity becomes numb, tingly, cold, blue, pale, or weak.
- Increasing swelling.
- Pain is increasing or not improving.
- Any difficulty in moving the fingers or toes.

The following note(s) should be read carefully:

Follow up with the doctor that you were referred to within 1-2 days. When you call to make your

FORM # 1010B

ADDRESSOGRAPH

Emergency Department

DISCHARGE INSTRUCTIONS

BUDDHI,VIKARAM
ACCT# 0048701087
NAME ADM DT: 05/24/2008
DOB:05/10/1970 S6Y M
MRN:0015067351

DR:ER,PHYSICIAN:
REL:



VIKARAM BUDDHI

Saint Margaret Mercy North Campus

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appointment, please let the doctors office know that you were seen in the Emergency Department today and that your condition requires early follow-up care. Return to the Emergency Department If your condition worsens before your scheduled appointment with the doctor.

Call Dr. Jeannie Rhodes DO ((219) 933-2291) at 5530 hohman avenue, Hammond today or as soon as possible. Please call in the morning. Let the office know that you were seen at Saint Margaret Mercy North Campus (219-932-2300 or 708-891-9305) and that you were told to call the office to arrange a follow-up visit within 1-2 days.

TAKE OTC MOTRIN FOR PAIN AS NEEDED.

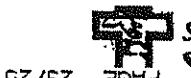
RETURN TO ER IF CONDITION WORSENS.

I understand that the treatment I have received was given on an emergency basis only. I understand that further treatment may be necessary. I have been given a copy of the above instructions. I understand these instructions and I will arrange for follow-up care as outlined above. If my condition worsens, I will call my doctor or return to the hospital. Emergency Department phone number: 219-932-2300 or 708-891-9305.

Signed:

Relation to Patient

Emergency Department
DISCHARGE INSTRUCTIONS



Sisters of St. Francis Health Services

SAINT MARGARET MERCY HOSPITAL

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FORM # 10100

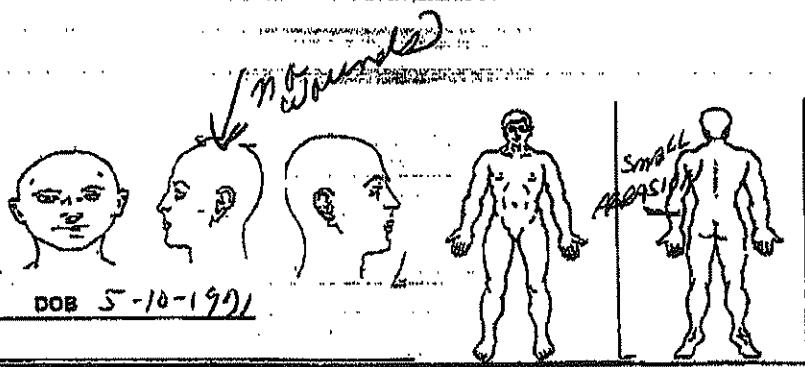
ADDRESSOGRAPH

BUDDHI,VIKARAM
ACCT# 0048701967
NAME ADM DT: DS/24/2008
DOB:05/10/1970 SBY M
MRN:0015057351

DR:ER,PHYSICIAN
REL:

2194653820

11/13/2007 13:55

**Medical Progress Note**

Date: 6-8-06 Time:

Patient Name: UJIKRAN S. BUNDHIA DOB: 5-10-1991

Allergies:

Subjective Complaint: Pulled from Tap-Bunk to floor Duration:

Symptoms: (1) fall, small abrasions and bruise

OBJECTIVE:	Normal	Findings: BP		Pulse	Resp	Temp	Wt.
		Labs	X-rays				
Eye	-						
Head, Ears, Nose, Throat	-						
Lungs/Chest	-						
Heart	-						
Abdomen	-						
Genito-Urinary	-						
Musculoskeletal	-	(1) forearm bruised (1) small abrasion					
Skin	-						
Neuro	-						
Other	-						

Assessment: Patient states pulled off tap-bunk of bed. (1) forearm small abrasions and bruise. No other wounds anywhere on body. All able to do R.O.M.

Plan: and daily activity. - Plaster

Monitor for any future problems with arm or possible head injuries.

Follow-up: Let medical know if any problems start.

Patient education: Keep arm on (1) arm clean.

Cheryl J. Lockhart
Nurse Signature

Physician Signature

B.C.W.

DEFENSE EXHIBIT M

6-21-06

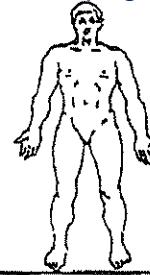
Medical Progress Note

Date:

Time:

Patient Name

Allergies:



Subjective Complaints:

Duration:

Symptoms:

7 days - just after action - ① elbow injured
Go pain in ② elbow

OBJECTIVE:	Normal	Findings:BP		Pulse	Resp	Temp	Wt.
		Labs	X-rays				
Eye							
Head, Ears, Nose, Throat							
Lungs/Chest							
Heart							
Abdomen							
Genito-Urinary							
Musculoskeletal							
Skin							
Neuro							
Other							

Assessment: Normal Elbow ROM. Extends fully.
Slight + present, usually
Localized tenderness over joint.

Erb's palsy: Radial head non-tender.

Elbow sprain → no suspicion of fracture.

Plan: Triptan 600 mg BID pm x 10.

Follow up as needed.

Follow-up:

Patient education:

Nurse Signature

Physician Signature

6/27/06

Name

Buddi Vikram

Hosp. No.

Room

Doctor

Data Time Problem Number

FORMAT: Problem Number and TITLE:

S = Subjective

O = Objective

A = Assessment

P = Plan

7/25/07 10:30 Called to X pod for inmate w/
unknown injury.
Upon arrival found inmate
sitting down ATOX3, stood up ambulatory
w/ 1" linc laceration posterior head.
Cleaned wound / 1cc. pack given
Inmate requested tourn.

A) ATOX3, Ambulatory, Perla, No Numb def.
BP 10/70

P 20

P 100

O2 49%

Referred to PUP Lynn w/

CME-B → O'Donnell

7/26/07 Already sh. fracture 10-29-07 10-26/07
10:30 To address open medical issue. Tefam shot ordered for above injury.

10/3/07 C/O sharp pain during urination & 4pm
BP 10/80 Reports pain prior to bilateral LP sides

P 18 S: below n because pain at tip of penis
D 2/98 Urine in urination onset & 4pm off b.

T 98.7 or reports dry skin all over (P) burning (P) pain
U 148 O: Can ATOX3 Approp REENT Generalized
Cr: 5,52 Dry

by CR even urab.
Abd. Bxxt (1) tenderness, (2) flank pain

A: 1 Dystalgia
2 Dysuria

P: - Cipro 250mg BID x 5Dys
- Ducts

10/11/07
10:30 placed in Nurses Bin

MCC CHICAGO, ILLINOIS
institution

Date/Time: November 26, 2007 / 5:45 p.m.

TO : Special Housing Unit Officer

FROM : J. Ewell, Lieutenant , (Name/Title)

SUBJECT : Placement of Buddhi, Vikram Reg. No. 08742-027, in Administrative Detention

(a) Is pending a hearing for a violation of Bureau regulations;

(b) Is pending investigation of a violation of Bureau regulations;

(c) Is pending investigation or trial for a criminal act;

(d) Is to be admitted to Administrative Detention

(1) Since the inmate has requested admission for protection;

I hereby request placement in Administrative Detention for my own protection.

Inmate Signature/Register No.: _____

Staff Witness Printed Name Signature: _____

(2) Since a serious threat exists to individual's safety as perceived by staff, although person has not requested admission; referral of the necessary information will be forwarded to the UDC/DHO for appropriate hearing.

(e) Is pending transfer or is in holdover status during transfer.

(f) Is pending classification or pending investigation/Placed in Disciplinary Segregation.

(g) Is terminating confinement in Disciplinary Segregation and has been ordered into Administrative Detention by the Warden's designee.

It is this officer's decision based on all the circumstances that the above named inmate's continued presence in the general population poses a serious threat to life, property, self, staff, other inmates, or to the security or orderly running of the institution because*

YOU ARE BEING PLACED IN ADMINISTRATIVE DETENTION DUE TO BEING A VICTIM OF AN ASSAULT. YOU WILL BE ADVISED OF ANY CHANGES IN YOUR STATUS.

Therefore, the above named inmate is to be placed in Administrative Detention until further notice. The inmate received a copy of this Order on (date / time) November 26, 2007 / 7:29 p.m.

Staff Witness Signature/Printed Name J. Ewell, Lieutenant Date November 26, 2007

*In the case of D), before the review to that officer is a sufficient time period for a review and decision, which is documented here

Record Copy - Inmate Concerned (not necessary if placement is a result of holdover status); Copy - Captain; Copy - Unit Manager; Copy - Operation Supervisor - Administrative Detention Unit; Copy - Central File

(This form may be replicated via WP)

Replaces BP-308(52)+